

NEW BOSTON POLICE DEPARTMENT – REQUEST FOR REPORT

Date: _____

Case #: _____

I, _____ representing _____
PLEASE PRINT COMPANY/FIRM

Hereby make request from the New Boston Police Department for a report concerning:

Type of incident/nature of the report requested: (Accident Report, Incident, Criminal, Civil, etc.)

Date of incident: _____ Reported by: _____

Victim of Crime: _____ Type of loss: _____

Location of incident/loss: _____ Purpose of request: _____

Name of drivers or pedestrians involved: _____

REQUESTER'S INFORMATION:

Name: _____ DOB: _____
LAST FIRST MIDDLE

Home Address: _____
STREET AND NUMBER APT. #
CITY STATE ZIP

Home Phone: (____) _____
Requester's Signature

ADMINISTRATIVE USE ONLY

() Report Granted Requested # _____

() No Report on File Amount Charged \$ _____

() Report Denied Receipt # _____

() Pending Court Action Admin. Secretary's Initials _____

Comments:

NOTE: For all requested Police Report copies there is a \$20.00 fee for the 1st 10 pages and a \$1.00 for each additional page thereafter, this does include attorney discovery request. This fee is payable to the New Boston Police Department by Cash, Personal Check, Bank Check or Money Order.